

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

Bibi Fathema Dowlut

Case No. 18-70651 JAD

Reporting Period: April, 2020

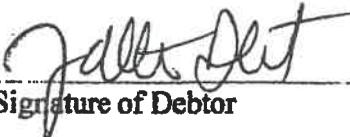
MONTHLY OPERATING REPORT
(INDIVIDUAL WAGE EARNERS)

File with Court and submit copy to United States Trustee within 14 days after end of month

Submit copy of report to any official committee appointed in the case.

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)	✓	
Schedule of Cash Receipts and Disbursements - continuation	MOR-1 (INDV) (CONT)	✓	
Bank Reconciliation			
Copies of bank statements		✓	
Cash disbursements journals			
Copies of tax returns filed during reporting period			
Summary of Unpaid Postpetition Debts	MOR- 4		
Debtor Questionnaire	MOR- 5		

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.


 Signature of Debtor

6/30/2020

Date

Signature of Joint Debtor

Date

Signature of Preparer

Date

Printed Name of Preparer

FORM MOR (INDV)
 (10/00)

Bibi Fathema Dowlut

Debtor

Case No. 18-70651 JAD

Reporting Period: April, 2020**INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS**

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account.

	Current Month	Cumulative Filing to Date
	Actual	Actual
Cash - Beginning of Month	<u>394.34</u>	
RECEIPTS		
Wages (Net)		
Interest and Dividend Income		
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)		
Total Receipts		
DISBURSEMENTS		
ORDINARY ITEMS:		
Mortgage Payment(s)		
Rental Payment(s)		
Other Secured Note Payments		
Utilities		
Insurance		
Auto Expense		
Lease Payments		
IRA Contributions		
Repairs and Maintenance		
Medical Expenses		
Household Expenses		
Charitable Contributions		
Alimony and Child Support Payments		
Taxes - Real Estate		
Taxes - Personal Property		
Taxes - Other (attach schedule)		
Travel and Entertainment		
Gifts		
Other (attach schedule)		
Total Ordinary Disbursements		
REORGANIZATION ITEMS:		
Professional Fees		
U. S. Trustee Fees		
Other Reorganization Expenses (attach schedule)		
Total Reorganization Items		
Total Disbursements (Ordinary + Reorganization)		
Net Cash Flow (Total Receipts - Total Disbursements)		
Cash - End of Month (Must equal reconciled bank statement)	<u>394.34</u>	

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS - continuation sheet

BREAKDOWN OF "OTHER" CATEGORY	Current Month	Cumulative Filing to Date
	Actual	Actual
<u>Other Income</u>		
<u>Other Taxes</u>		
<u>Other Ordinary Disbursements</u>		
<u>Other Reorganization Expenses</u>		

Debtor

Reporting Period:

April, 2020

STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero. Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes. Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	Ending Tax Liability
Federal Withholding						
FICA-Employee						
FICA-Employer						
Unemployment						
Income						
Other:						
Total Federal Taxes						
State and Local						
Withholding						
Sales						
Excise						
Unemployment						
Real Property						
Personal Property						
Other:						
Total State and Local						
Total Taxes						

SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

	Current	Number of Days Past Due				Total
		0-30	31-60	61-90	Over 90	
Accounts Payable						
Wages Payable						
Taxes Payable						
Rent/Leases-Building						
Rent/Leases-Equipment						
Secured Debt/Adequate Protection Payments						
Professional Fees						
Amounts Due to Insiders*						
Other:						
Other:						
Total Postpetition Debts						

Explain how and when the Debtor intends to pay any past-due postpetition debts.

* "Insider" is defined in 11 U.S.C. Section 101(31).

Debtor

Reporting Period: April, 2020**ACCOUNTS RECEIVABLE RECONCILIATION AND AGING**

Accounts Receivable Reconciliation	Amount
Total Accounts Receivable at the beginning of the reporting period	
+ Amounts billed during the period	
- Amounts collected during the period	
Total Accounts Receivable at the end of the reporting period	

Accounts Receivable Aging	Amount
0 - 30 days old	
31 - 60 days old	
61 - 90 days old	
91+ days old	
Total Accounts Receivable	
Amount considered uncollectible (Bad Debt)	
Accounts Receivable (Net)	

DEBTOR QUESTIONNAIRE

Must be completed each month	Yes	No
1. Have any assets been sold or transferred outside the normal course of business this reporting period? If yes, provide an explanation below.		X
2. Have any funds been disbursed from any account other than a debtor in possession account this reporting period? If yes, provide an explanation below.	X	
3. Have all postpetition tax returns been timely filed? If no, provide an explanation below.	X	
4. Are workers compensation, general liability and other necessary insurance coverages in effect? If no, provide an explanation below.	X	

Last statement: March 31, 2020
 This statement: April 30, 2020
 Total days in statement period: 30

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 3004211276
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FATHEMA DOWLUT
 DEBTOR IN POSSESSION
 CASE NUMBER 18-70651-JAD
 365 OAK KNOll RD
 HOLLIDAYSBURG PA 16648-2613

Select Banking

Account number	3004211276
Low balance	\$394.34
Average balance	\$394.34
Avg collected balance	\$394

DAILY ACTIVITY

Date	Description	Additions	Subtractions	Balance
03-31	Beginning balance			\$394.34
04-30	Ending totals	.00	.00	\$394.34

** No activity this statement period **

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00